

## ISSUE SLIP STAPLE AREA (for additional cross references)

7/1  
11-2-00

| POSITION                         | INITIALS | ID NO. | DATE     |
|----------------------------------|----------|--------|----------|
| <b>FEE DETERMINATION</b>         | SMC      |        | 10/11/00 |
| <b>O.I.P.E. CLASSIFIER</b>       |          | 21     | 10/17/00 |
| <b>FORMALITY REVIEW</b>          | ✓/3      | JC366  | 10/31/00 |
| <b>RESPONSE FORMALITY REVIEW</b> | M.H.     | 675    | 04-12-01 |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

| Claim    | Date |
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| Final    |      |
| Original |      |
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| Claim    | Date |
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| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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